



Attorney Docket # 2132-45PCON

2/26/2005
2135
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Harri VATANEN

Serial No.: 09/835,668

Filed: April 16, 2001

For: Method and System for Application of a Safety
Marking

Examiner: Song, Hosuk
Group Art: 2135

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

February 22, 2005

(Date of Deposit)

Alfred W. Froebich
Name of applicant, assignee or Registered Representative

Signature

February 22, 2005

Date of Signature

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

SIR:

Applicant hereby requests a one-month extension of the original shortened statutory response period set in the Office Action of October 20, 2004. A check in the amount of \$120.00 in payment of the government fee for a one-month extension of time is enclosed herewith. Any additional fees or charges required at this time in connection with the present application may be charged to our Patent and Trademark Office Deposit Account No. 03-2412.

In response to the Office Action dated October 20, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

02/25/2005 RFEKA001 00000004 09835668
01 FC:1261 120.00 DA

03/14/2005 KWATSON 00000004 032412 09835668

-1-

01 FC:1202 250.00 DA

02 FC:1201 200.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

9-835668
2132-HSPCON

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	12	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	12 minus 20 =	0
INDEPENDENT CLAIMS	2 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL		OR TOTAL	710~

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					RATE	ADDITIONAL FEE
Total	• 25	Minus	** 20	= 5		
Independent	• 4	Minus	*** 3	= 1		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

OTHER THAN
SMALL ENTITY OR SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	250
X40=		OR X80=	200
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	450

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					RATE	ADDITIONAL FEE
Total	•	Minus	**	=		
Independent	•	Minus	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					RATE	ADDITIONAL FEE
Total	•	Minus	**	=		
Independent	•	Minus	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>						

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.